

BOX AF
RESPONSE UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2613

7-2-03 P.Z.

03500.013021

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

A	In re A	application of:)		
10 h	KATS	UMI IIJIMA, ET AL.	:	Examiner: V. Le	
Ent 1r	Applic	eation No.: 09/174,461	;	Group Art Unit: 2	613
10/2/03	Filed:	October 19, 1998	;		RECEIVED
1 (1 '	For:	IMAGE PICKUP	;	August 22, 2003	AUG 2 7 2003
VC		APPARATUS	:		Technology Center 2600

MAIL STOP AF

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the Official Action dated May 22, 2003, Applicants respectfully request that the following amendments and remarks be entered and considered in the above-identified application.



Corres. and Mail
BOX AF

Docket No. 03500.013021

KATSUMI IIJIMA, ET AL.

Application No.: 09/174,461

Filed: October 19, 1998

For: IMAGE PICKUP APPARATUS

Examiner: V. Le

Group Art Unit: 2613

Date: August 22, 2003

MAIL STOP AF

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

RECEIVED

AUG 2 7 2003

Technology Center 2600

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		CLA	IMS AS AMENDE	ED .		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14	MINUS	24	0	x \$9 \$18	-0-
INDEP. CLAIMS	2	MINUS	5	0	x \$42 \$84	-0-
Fee for Multiple Dependent claims \$140/\$280					0	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					-0-	

°Verified Statement claiming small entity status is enclosed, if not filed previously.
A check in the amount of \$ is enclosed.

	Charge \$ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' attorney, may be reached in our Washington office by telephone at (202) 530-1010. All correspondence should be directed to our address given below Attorney for Applicants Projective in No. 22,078
	Registration No. 32,078

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

CPW\gmc

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